

### MISSOURI DEPARTMENT OF HEALTH STATE PUBLIC HEALTH LABORATORY DATAMASTER MAINTENANCE REPORT

FIGATH / LOOHOL PROGRAM

1111-8 7

	Complete this report in duplicate at the time of the registred. Send copy to Department of Health; retain orig	ular monthly preventive me			
	is repaired. Send copy to Department of Health; retain orig	inal in department file.	dintenance ch	eck, and whenever	r İnstrumer
	COCATION OF INSTRUMENT (STREET AND CITY)			DATE OF INSPECTION	O'
4	Classical (Y) is the	. 1		TIME OF INSPECTION	
	CHECKI IST: Place a Charles II	Tipton 1110	65081	08:50	•
روک	in observed values where determined.) Unchecked items mi	ust be corrected before using	if operating was instrument	vithin established II	mits. (Write
1	DIAGNOSTIC CHECK (PRINTOUT ATTACHED)				
4	☑ COMPUTER	☑ DETECTOR	· .	· .	
	: X PROGRAM	☑ FILTERS			<del></del>
1	HEATERS SAMPLE CHAMBER 50 °C	QUARTZ STANDA	ARD		· · · · · · · · · · · · · · · · · · ·
	☑ FLOW DETECTOR	CALIBRATION	-	·	
-	PUMP HIGH SPEED	PRINTER	,	· · · · · · · · · · · · · · · · · · ·	
-	INDICATOR LIGHTS		6.3		
÷	XI TIME AND DATE				· · · · · · · · · · · · · · · · · · ·
	SIMULATOR TEMPERATURE (34 °C ± 0.2°C) 34	· · · · · · · · · · · · · · · · · · ·	<del></del>		
j	A CALIBRATION CHECK -			· · · · · · · · · · · · · · · · · · ·	
•	Run three tests using a standard solution All there	ete muet he witht a re-		,	• •
	spread of .005 or less. Check the box corresponding to RECIRCULATION PUMP)	the standard solution being	of the standa Id used. (PRI	ard value and mus	t have a
	D 100% STANDARD AND DEAD		·3 (1 11)	ATTACHE	D) (USE
	☑ 0.100% STANDARD - MUST READ BETWEEN 0.095% ☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% (ONLY ONE STANDARD IS TO BE USER PER PER PER PER PER PER PER PER PER P				
-	(ONLY ONE STANDARD IS TO BE USED PER MAINTEN.	ANCE REPORT)		•	
1	EST 1 . 096 TEST 2	B91	TEST 3		
?	PERFORM R.F.I. TEST (PRINTOUT ATTACHED)			0996	· .
NUMBER OF REFUSALS, SINCE LAST MAINTENANCE PERCET AND MAINTENANCE PERCET.					
FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)					
	FUSALS (004) (009) (.0509)	(.1014)	i19) <i>(b</i> )	(Over .19)	A
:	of any new parts and describe any alteration or modification d within established limits (use other side if necessary)	that was made to restore	the instrume	nt to operate satisf	actorily
		··	•	•	
	Instrument Warking K	Vithin Pst	ohlich	ral Kimi	140
			<del>* : : /                                </del>		<u> </u>
	0 11			•	
	Guth  PEDENG DESIGNATION  LOT 091	120 EXP.	4-8-10		
TURE PRINT NAME				The state of the s	
		PRINT NAME			7 D
	PERMIT NUMBER/EXPIRATION DATE	Leo E 9	etre	2	
		1 5	etre	20	
		TELEPHONE NUMBER.  660:43	Petre 3-262	e 20	10 10 10 10 10 10 10 10 10 10 10 10 10 1



#### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 09120 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain 0.1198 percent (w/vol) ethyl alcohol. The expiration date for this lot number is April 8, 2010 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.10 percent BAC.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President GUTH LABORATORIES, INC.

Face This Side Down - This Edge In First

elem 1992 inganggan kanglangan ang persambahan inggan kanaman ni pengahan menggan, inggan penghan

# **BAC DataMaster**Evidence Ticket

TO ASTRATE OF MIDEOLOGIA TIPTON POLICE DEPARTMENT

DOC DATAMASTER SERIAL MUMBER 950902 86/02/99 89:86

--- DIRENDSTIC CHECK .-

COMPUTERS

OKAY

PROSKAM (64-67-2009):

OKRY

HEATERS

SAMPLE CHAMBERS

Sec

FLOW DETECTOR:

ONAY

111111

HIGH SPEED:

OKRY

DETECTOR

OKAY

FILTERS

OMAY

WHETE STIMES

OMAY

CILIBRATIONS

OKAY

PRINTER TEST
!"#\$%%'()\*+,-,/0123456789:;(=)?ef#CDDFG
!!LMLMMMOPQPSTUVWYYZD:]^L'abcdef\*shijklmno
renslammevz(!)\*\*

Operator Signature\_

40 BAS-

Face This Side Down - This Edge In First

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# **BAC DataMaster**Evidence Ticket

STATE OF HISSOURI TIPTON POLICE SEPONTHENT

PAC DATAMASTER SERIAL NUMBER 930085 94/80100

GREET TIME: 88:58

SUBJECT NAME:

10MVILL

DOD: 64/83/D4 SEX: M
STRIE/D.L.: MO/55/408214

NRMESTING OFFICER:

PETREE

OFFICER I.D.: 58011

FERMIT NUMBER: 900000

EMPIRATION DATE: 80/10/11
MISCELLAMEOUS DATE:

· -- BESTH OMLYSIS --

DEART TEST INTEGRAL CTANDOSD ADDIO INTERPERENCE .890 (0:15 VZMIRICD (0:15

Operator Signature\_\_\_

2208-02

#### Face This Side Down - This Edge In First

# **BAC DataMaster**Evidence Ticket

STATE OF MISSOURI FIRTON POLICE DEPARTMENT (1984)

-BOC DETEMPOSTER SCRIBE, NUMBER 0588.00 06480409

TESTING OFFICER:
PETPEE
OFFICER 1.D.: DOSTI
PERMIT NUMBER: 989023
EMPIRATION DATE: 92 19/11
MISCELLAMEOUS DATA:

#### --- SUPERVISOR WODE ---

	BLESS TEST	. 993	99:09
	INTERME STRIBERD	VERIFIED	09:09
	EXTENSE STREET	. 095	99:49
	ER TET	, 099	60:18
	EXTERMAL STAMBARD	096	69:10
	MUMMY TEST	. 909	89411
	UNTERNAL CIPALIDARIO	, 986	00:11
١	TEATH TEST	. 866	001112

M = 3 D1ML = ,1 ANG. = ,896

Operator Signature

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2208-02

### State of Missouri DEPARTMENT OF HEALTH



## PERMIT TYPE II



### LEO E. PETREE

is hereby authorized to instruct and supervise operators, train instructors, inspectalibrate, perform field repairs, and operate the following breath analyzer(s):  DATAMASTER					
Date <u>02/10/09</u>	Director of State Public Health Laboratory				
Number 920023	Margart T. Donnelly				
02/10/2011 Expires	Wangart / Commency				
expires	Director, Department of Health				
MO 580-0771 (7-88)	Lab. 4 (R7-88)				